

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	61007	3-8-00
O.I.P.E. CLASSIFIER		7	3-15-00
FORMALITY REVIEW		61001	5-10-00
RESPONSE FORMALITY REVIEW	gib	1091	10-12-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	10/15/00
1	✓
2	✓
3	✓
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If more than 150 claims or 10 actions
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